



TRAINING MODULE FOR GERIATRIC HEALTH CARE



Central Council for Research in Unani Medicine
Ministry of Ayush, Government of India

TRAINING MODULE FOR GERIATRIC HEALTH CARE

Two phases with a total of 64 Hours Training in
Integrated Promotive, Preventive and Therapeutic
Geriatrics focusing on strength of Unani Medicine



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MINISTRY OF AYUSH
GOVERNMENT OF INDIA

2025

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Module - I Perspectives, Promotive and Preventive Care

Module - II Therapeutic Care of the Elderly



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Training Module for Geriatric Health Care

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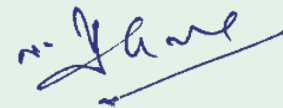
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PREFACE

Improvements in nutrition, sanitation, and the management of infectious diseases have significantly increased life expectancy worldwide, including in developing nations like India. However, it is essential that this increase in lifespan is accompanied by a better quality of life, ensuring individuals lead healthier and more fulfilling lives.

Recognizing the growing importance of geriatric care, the development of a well-structured module and training manual has been a pressing need. I extend my heartfelt gratitude to the expert committee and team members who have contributed to creating the Training Module for Geriatric Health Care and its comprehensive manual. I also wish to express my sincere appreciation to Dr. Mukhtar Ahmad Qasmi, Advisor (Unani), Ministry of Ayush, Government of India, for his invaluable coordination in this initiative.

I am confident that this training module will serve as a vital resource for Continuing Medical Education (CME) programs in Geriatric Health Care. Furthermore, I encourage Unani colleges across the country to incorporate this module into their undergraduate and postgraduate curricula to enhance the quality of geriatric care education.



Dr. N. Zaheer Ahmed

Director General

CCRUM

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3.	Geriatric Nutrition	02 hours	5
4.	Rejuvenation Therapy (Immunomodulators) and Unani Medicine	02 hours	6
5.	Ilāj bi'l Tadbīr (Regimenal Therapy) in Unani Medicine for Geriatric Health Care	04 hours	7
6.	Mental Health Care for Elderly	03 hours	8
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	Pre and Post training assessment	1+ 1 hour	
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	Total hours	26 hours	
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Unit	Subject	Teaching Hours	Page No.
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16.	Musculoskeletal & Joint Diseases	03 hours	25
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19.	Wound Management	02 hours	29
20.	Adjuvant Therapy for Cancer	01 hour	30
21.	Disease of sense organs (eyes, ears, nose, tongue and skin)	03 hours	31
22.	Geriatric Women Healthcare	03 hours	32
	Pre and Post training assessment	1+1 hour	
	Opening and closing sessions	1+1 hour	
	Total Hours:	38 hours	
	Grand total hours:	64 hours	

Module I

Perspectives, Promotive and Preventive Care

BASIC TENETS AND UNANI GERIATRICS

Unit	Subject	Course contents
1.	Introduction	What is Unani System of Medicine and how it is unique from other systems of Medicine. The upsurge of interest in Unani, the domestic and global scenario of the interest in view of its eco-friendly, cost effective and toxicity free nature due to its holistic approach. The available infrastructure, WHO policies etc.
2.	The historicity	The history of Unani and its link with Greek medicine. Unani knowledge in Non Unani texts and in folklore claims.
3.	The Basic Tenets	Seven basic components, known as <i>Umūre Tabī'iyya</i> . 1. <i>Arkān or Anasir</i> (Element) 2. <i>Mizāj</i> (Temperament) 3. <i>Akhlāt</i> (Humours-Body Fluids) 4. <i>A'dā</i> (Organs) 5. <i>Arwāh</i> (Vital Spirit) 6. <i>Quwā</i> (Faculties or Powers) 7. <i>Af'āl</i> (Functions)
4.	Concept of health and ill health	Unani, the science of life and longevity. Definition of <i>Sehat</i> and <i>Mard</i> . Theory of <i>Akhlāt Arba</i>
5.	Unani Diagnosis	Disbalance in <i>Asbāb Sitta Darūriyya</i> (Six Essential Factors)
6.	Principles of Treatment	<i>Ilāj bi'l Ghidhā</i> (Dietotherapy), <i>Ilāj bi'l Dawā'</i> (Pharmacotherapy), <i>Ilāj bi'l Yad</i> (Surgery), <i>Ilāj bi'l Tadbīr</i> (Regimenal therapy).
7.	Unani Classical Texts	Materia Medica and Unani Pharmacy, Herbal and Mineral resource, Unani Pharmacodynamics and Unani Pharmacy.
8.	Unani Geriatrics	Concept of aging in Unani system of medicine, <i>Rutūbat Gharīziyya</i> (innate humour), <i>Harārat Gharīziyya</i> (innate heat), <i>Tadabir e Mashayikh</i> through <i>Asbāb Darūriyya</i> , <i>Asbāb Ghayr Darūriyya</i> (Non-Essential Factors). Rejuvenation therapy. Care of the diseases of elderly in Unani Medicine. The scope of integration.

CURRENT ISSUES IN GERIATRIC HEALTH CARE

Unit	Subject	Course contents
1.	Definition of Elderly	Definition of elderly age, classification of elderly on the basis of functional and cognitive status, biology of ageing, physiological ageing process on molecular level and clinical level, theories of aging, aging as a programmed state and aging resulting from an accumulation of damage.
2.	Demography of the elderly	Prevalence of elderly population in Indian and global scenario, morbidity and mortality, comparison between urban and rural areas
3.	Illness profile in the elderly	Diseases more common in elderly, morbidity profiles among the elderly, epidemiology of chronic illness, identification of reversible diseases
4.	How elderly differ from adults?	Anatomical and physiological changes, Aging Changes of the Cardiovascular System, Respiratory System, Gastrointestinal System, Urology System, Musculoskeletal System, Neurological System, Endocrine System, Hematologic and Immune Systems
5.	Special Hazards of Illness in elderly	Functional decline in elderly, pattern of presentation of diseases particular to old people
6.	Management of diseases in elderly	Diagnostic problems, Treatment Goals, Treatment problems
7.	Rehabilitation in elderly	Multiple disability/impairment of elderly, institutional vs home service, rehabilitation objectives, process of rehabilitation, institutional vs home service.
8.	Prevention of diseases in elderly	Measures of primary, secondary and tertiary prevention for the elderly
9.	Promotion of health in elderly	Rehabilitation as an important component to restore the functionality in elderly, exercise/ physical activity, diet/ nutrition and psychological support
10.	<i>Tadabir e Mashā'ikh</i> in Unani medicine	<i>Tadabir e Ghidha</i> for <i>Mashā'ikh</i> (Diet regimens for elderly), Balance diet (<i>Mutawazin ghidha</i>), <i>Riyadat</i> (Exercise), <i>Dalk</i> (Massage), <i>Nutul</i> (douching), life style modifications.

GERIATRIC NUTRITION

Unit	Subject	Course contents
1.	Geriatric Care as defined in Unani Medicine	<i>Tadābīr-i-Mashā'ikh</i> (Elderly Care) How to protect <i>Ruṭūbat Gharīziyya</i> (innate humour) and <i>Harārat Gharīziyya</i> (innate heat)
2.	Status of <i>Akhlāt</i> (Humours) in elderly and its impact on Health and Disease	Basic concept of <i>Akhlāt</i> (Humours), relationship between the diet and health of an individual, importance of <i>Mizāj (Bārid Raṭb, Bārid Yābis, Ḥārr Raṭb, Ḥārr Yābis)</i> .
3.	Role of anxiety, grief and diet in acceleration of aging	Causes of anxiety and grief in elderly persons and its effect on promotion of early onset of aging. Dietary substances responsible for early aging. Management of above stated facts to overcome early aging.
4.	Illness profile in the elderly	Diseases more common in elderly, morbidity profiles among the elderly
5.	Special Hazards of Illness in elderly	Functional decline in elderly, pattern of presentation of diseases particular to old people
6.	Management of diseases in elderly	Diagnostic problems, Treatment Goals, Treatment problems
7.	Rehabilitation in elderly	Multiple disability/impairment of elderly, institutional vs home service, rehabilitation objectives, process of rehabilitation
8.	Prevention of diseases in elderly	Measures of primary, secondary and tertiary prevention for the elderly
9.	Promotion of health in elderly	Rehabilitation as an important component to restore the functionality in elderly, exercise/ physical activity, diet/ nutrition and psychological support
10.	<i>Tadābīr-i-Mashā'ikh</i> in Unani medicine	<i>Tadābīr-e-Ghidha</i> for <i>Mashā'ikh</i> (Diet regimens for elderly), Balance diet (<i>Mutawazin Ghidha</i>), <i>Riyadat</i> (Exercise), <i>Dalk</i> (Massage), <i>Nutul</i> (douching)

REJUVENATION IN ELDERLY THROUGH UNANI MEDICINE

Unit	Subject	Course contents
1.	Introduction	What is immune system, how it acts on the body, types of immunity. Impact of immuno-modulators at early age to get its optimum effect.
2.	Immunity (<i>Quwwat-ī-Mudāfi‘at</i>) and correlation of immunomodulators with Unani Medicine	Importance of <i>Tabī‘at</i> , how it maintains the balance in temperament (<i>‘Etidāl-ī-Mizāj</i>)
3.	Classification of immunomodulators	Immuno-adjuvants, Immunostimulants, life style modifications by manipulating <i>Asbāb Sitta Darūriyya</i> (Six essential factors- Air, water, Physical activity and rest, Psychological activity and Repose, Sleep and Wakefulness, Elimination and Retention
4.	Specific diets	Age specific diet, <i>Ghidha-e-Latif</i> , <i>Ghidha-e-Latif Kasir-al-Taghdhiya jayyid al-Kaimus</i> (Attenuated, highly nutritious and good chyme forming diet), <i>Mā’ al-Sha‘īr</i> , <i>Jubn</i> (cheese), <i>Mā’ al-Jubn</i> (cheese water), <i>Mā’ al-Lahm</i> (Meat distillate) etc.
5.	Prominent single and compound formulations	<i>Kalonji</i> (<i>Nigella sativa</i>), <i>Badām Shirīn</i> (<i>Prunus amygdalus</i>), <i>Khajūr</i> (<i>Phoenix dactylifera</i>) <i>Tiryāq Farūq</i> , <i>Tiryāq Wabaī</i> , <i>Khāmira Marwārīd</i> , <i>Dawā’ al-Kurkūm</i> etc.
6.	Integration	Diet therapy of Unani Medicine is the principal of positive health care and has all potential to strengthen the mainstream geriatric care.

Ilāj bi'l Tadbīr (REGIMENAL THERAPY) IN GERIATRIC CARE

Unit	Subject	Course contents
1.	Senile body constitution, anatomico-physiological status of the body with reference to <i>Ilaj bi'l Tadbīr</i> for elderly	Aging process and senile degeneration, elderly anatomical and psychological changes in cardiovascular system, respiratory system, gastrointestinal system, nervous system, locomotor system, urogenital systems and immunological status in the elderly.
2.	Status of <i>Akhlāt</i> and Concept of <i>Mizāj</i> with reference to <i>Ilaj bi'l Tadbīr</i> for geriatric care	Importance of <i>Tabī'at</i> , how it maintains balance in temperament (<i>'Etidāl-ī-Mizāj</i>)
3.	Geriatric patient examination, Diseases specific to elderly treatable by Regimenal Therapy	Immunoadjuvants, Immunostimulants, life style modifications by manipulating <i>Asbāb Sitta Darūriyya</i> (Six essential factors- Air, water, Physical activity and rest, Psychological activity and Repose, Sleep and Wakefulness, Elimination and Retention
4.	Specific diets	Age specific diet, <i>Ghidha-e-Latif</i> , <i>Ghidha-e-Latif Kasir-al-Taghdhiya jayyid al-Kaimus</i> (Attenuated, highly nutritious and good chyme forming diet), <i>Mā' al-Sha'īr</i> , <i>Jubn</i> (cheese), <i>Mā' al-Jubn</i> (cheese water), <i>Mā' al-Lahm</i> (Meat distillate) etc..
5.	Prominent single and compound formulations	<i>Kalonji</i> (<i>Nigella sativa</i>), <i>Badām Shirīn</i> (<i>Prunus amygdalus</i>), <i>Khajūr</i> (<i>Phoenix dactylifera</i>) <i>Tiryāq Farūq</i> , <i>Tiryāq Wabaī</i> , <i>Khāmira Marwārīd</i> , <i>Dawā' al-Kurkūm</i> etc.
6.	Integration	Diet therapy of Unani Medicine is the principal of positive health care and has all potential to strengthen the mainstream geriatric care.

MENTAL HEALTH CARE FOR THE ELDERLY

Unit	Subject	Course contents
1.	Introduction of Mental health	Definition of health, mental health, brief description of mental health in Unani medicine
2.	Concept of Mental health	Components of Mental health, Criteria of Adjustment and Mental health, Difference between Mental health, mental illness and mental health problems
3.	Factors affecting mental health	Individual attributes and behaviours (genetic and biological factors), Socio-economic circumstances (<i>viz</i> immediate social surroundings including their opportunity to engage positively with family members, friends or colleagues) and Environmental factors (sociocultural and geopolitical environment in which people live). Interaction between different determinants of mental health.
4.	Characteristics of Mental Health	Characteristics of a mentally healthy individual or a well-adjusted person, self-evaluation, sense of personal security, adjustability, emotional maturity, rationale attitude towards problems, absence of extremism, realistic in behaviour, enjoyment and satisfaction from daily routine job.
5.	Components of Mental Health in Elderly	Reality Orientation, Self-awareness and self-knowledge, Self-esteem, ability to exercise voluntary control over behaviour, ability to form affectionate relationship, pursuance of productive and goal directed activity

Unit	Subject	Course contents
6.	Indicators of positive mental health	Positive attitude towards self, Self-actualization, Resistance to stress, Personal autonomy, Accurate perception of reality, Environmental mastery
7.	Importance of Mental health care in elderly	Necessity of Mental health care in elderly, psychological problems in elderly, social isolation, age related challenges to elderly like poor memory, eyesight, hearing etc, chronic old age health problems (hypertension, heart disease, diabetes, arthritis etc), significance of mental health care in elderly
8.	Concept of Mental health care in Unani medicine	Description of <i>Quwwat-e-Nafsaniyya</i> (Psychic faculty), <i>Asbab-e-Sitta Darūriyya</i> (six essential factors) and mental health, Principle of treatment/ Psychotherapy (<i>Ilāj-e-Nafsāni</i>) in Unani classical literature, treatment in Unani medicine which includes Brain tonics (<i>Muqawwiyat-e-Dimagh</i>), Exhilarants (<i>Mufarrihat</i>), Porridge (<i>Hareera Muqawwi-e-Dimagh</i>)
9.	Some Regimenal therapies (<i>Ilāj bil Tadbīr</i>) and diets (<i>Ghidha</i>) in Unani medicine	Head massage with oils (<i>Tila</i>), Inhalation (<i>Shamum</i>), nasal drop (<i>Sa 'ūt</i>) and <i>Aghdhiya Latifa</i> (easily digestible food such as meat of small birds and fishes)

GERIATRIC CARE COUNSELLING AND SOCIAL SUPPORT

Unit	Subject	Course contents
1.	Introduction	Introduction to the counselling and social support system as relevant to old age; Indian and global scenario.
2.	Counselling	What is counselling? Meaning of counselling, objectives of counselling, types of counselling, approaches of counselling, counselling process, steps of counselling process, characteristics of the client, characteristics of the counselor, adjustment and maladjustment traits in personality, analysis of adjustment and maladjustment traits in personality, counselling as solution for adjustment, counselling as solution to maintain human relationship.
3.	Social Support and Social Adjustment	What are social support and social adjustment? Why are social support and social adjustment important? Family support for elderly in joint family and in nuclear family, utilization of services of elderly people for family- in joint family, in nuclear family, social support for elderly, scope and utilization of services of elderly people for society, methods of social utilization of elderly people such as re-employment, advisors, consulting subject experts, counselors, scope of services of elderly people in the management of old age care centres, recommended strategies, recreation of elderly people, occupational supports for elderly people, familial support for elderly women, social support for elderly women.

REFERRAL REQUIREMENT AND CLINICAL JUDGEMENT IN GERIATRIC PRACTICE

Unit	Subject	Course content
1.	Introduction	For comprehensive care, all elderly or geriatric patients are typically required to register at a geriatric service centre. Certain cases will require referrals. Timely decision-making is essential for expert medical and surgical treatment for severe and serious co-morbidities. Availability of referral services.
2.	Referral need, Timely Clinical Judgment and Mutual Referral Arrangement	A geriatrician will closely monitor QOL as well as the onset and progression of associated co-morbidities. A geriatrician will assess the range of issues and promptly determine whether to refer patients for diagnostic and therapeutic purpose to another specialty unit. It is essential to have consensus and cooperative understanding for referral.
3.	Therapeutic nutritional care for elderly cases	Recommending a particular diet through Dietotherapy (<i>Ilaj-bil-Ghidha</i>) in elderly. For certain older people, a specialized opinion and planning may be necessary due to a serious illness that warrants a referral.
4.	Musculoskeletal, Trauma and Orthopedic Care of Geriatric population	Major chronic clinical conditions like knee osteoarthritis, spondylitis, degenerative changes, bone TB and avascular necrosis of the bones which badly impact the QOL and required medication or surgical interventions in case of severity. Referral of Geriatric patients for clinical and investigation's purpose.
5.	Endocrine and metabolic disorders	The elderly with metabolic diseases like Diabetes Mellitus, obesity, hyperlipidaemia and hypertension, osteoporosis, cancer, complications of comorbidities as well as endocrine disorders like thyroid and parathyroid disorder need proper investigative and therapeutic strategy plan for urgent referral.
6.	Neurological, neuro-muscular and neurosurgical disorders	Advanced stage and in acute onset of neuromuscular, neurodegenerative like cognitive disorders, dementia, and meningitis, patient should be referred timely to specialized care centres for therapeutic strategies and special investigations

Unit	Subject	Course content
7.	Psychiatric disorders	The psychiatric diseases like melancholia, Schizophrenia, delusional and mood disorders are urgently required referral to Gero psychiatrists and neuropsychiatrists for collaborative approaches, planning treatment interventions, and diagnostic purposes.
8.	Cardiovascular disorders	Elderly patients with unstable angina, and myocardial infarction, <i>Insidad Shiryan Iklili</i> (Coronary Occlusion), <i>Iltihab Batana Qalb</i> (Endocarditis), <i>Izam al-Qalb</i> (Hypertrophy of the Heart), <i>Amrad Adalāt-i-Qalb</i> (Cardiomyopathies), <i>Fisharuddam</i> (Hypertension), <i>Salābate Shiryan</i> (Arteriosclerosis), <i>Anurisma</i> (Aneurysm), and <i>Amrad Samamate Qalb</i> (Valvular Heart Diseases) are urgently required referral for integrative and collaborative approaches, planning treatment interventions, and diagnostic purposes.
9.	Chest and tuberculosis	For developing management strategies and conducting advance investigations, patients who are uncontrolled, un-diagnosed, MDR or not responding to treatment, there is an urgent need of immediate referral to a specialized chest care centre
10.	Gastrointestinal disorders	Perforated peptic ulcer, GI haemorrhage, Acute abdomen and colon cancer are the most significant gastrointestinal illnesses required urgent referral for both diagnostic, therapeutic and surgical interventions.
11.	Urological/ Nephrological disorders	Major issues related to urogenital system like prostate and bladder cancer, BPH, recurrent UTI, ARF, CRF, Haematuria, obstructive renal and cystic stones, chronic cystitis, dysuria, frequency and urgency, stress incontinence, etc. urgently required therapeutic, diagnostic, and in severe cases if required renal transplant planning purposes.
12.	Surgical ailments associated with co morbidities	An elderly patient have other surgical associated issues; they should be referred as emergency case to a specialist for surgery and necessary therapeutic intervention.
13.	Cancer & Metastatic Tumour in elderly population	Prostate, bladder, stomach, lung, and other cancers will require regular referrals to an oncology surgery specialist for staging evaluation and management planning.

Module II

Therapeutic Care of the Elderly

NEURODEGENERATIVE DISEASES

Unit	Subject	Course contents
1.	Definition of Elderly	Define neurodegenerative disorders (NDDs), common age related NDs, Epidemiology and demographic trends in senile NDs globally and nationally.
2.	Anatomy & physiology of Neuron	Main structural and functional age-related changes occurring in brain & nervous system.
3.	Preventive strategies	Measure to avoid senile neurodegeneration through maintaining <i>Asbab Sitta Daruriyya</i> (the six essential causes).
4.	Cause of pronounced neuro-degeneration	Physiological & degenerative toxic & metabolic factors, free radical oxidative injury, air, water and food pollution, lack of mental, physical activity, chronic life style disorders.
5.	Diagnostic Criteria	Methods of diagnosis and assessment of neurodegenerative condition- structural, functional, angiological, cognitive & psychometric.
6.	Therapeutic modalities	Studies related to neurodegenerative disorders in Unani medicine
7.	Rehabilitation and occupational therapy	To be planned individually in each case
8.	Lifelong follow up	Follow up for geriatric health and age-related ailment lifelong.
9.	Unani remedies	Description of single & compound formulations with their Unani mechanism of action.

NEUROPSYCHIATRIC DISORDERS

Unit	Subject	Course content
1.	Introduction and demography of Neuropsychiatric disorders in Elderly	Prevalence data for neuro-psychiatric disorders among elderly population, conservative estimation, psycho-geriatrics as an area of specialization in geriatrics.
2.	Common stressors in Elderly	Description of common stressors precipitating psychiatric illness in elderly.
3.	Common Neuro-psychiatric disorder in Elderly	Depressive disorders, Dementias and Alzheimer's dementia, Schizophrenia / Paranoid, Delusional disorder, Anxiety disorder, Personality disorder, Sleep disorder, Alcohol / drug abuse.
4.	Geriatric Depression	Prevalence in elderly, geriatric depression as heterogeneous condition, etiology and clinical picture of depression in elderly, differential diagnosis.
5.	Dementia	Prevalence in elderly, geriatric dementia as heterogeneous condition, etiology and clinical picture of dementia in elderly, differential diagnosis with special reference to Dementia of Alzheimer's type (DAT).
6.	Schizophrenia and Delusional Disorders	Prevalence in elderly, geriatric schizophrenia and delusional disorders, their etiology and clinical picture of schizophrenia and delusional disorders in elderly, differential diagnosis.
7.	Miscellaneous disorders	Anxiety disorder, Personality disorders, Sleep disorders, Alcohol/Drug Abuse, their etiology and clinical picture in elderly, differential diagnosis
8.	Principles of Treatment	<i>Tartīb</i> (Producing moistness) <i>Tadhīn</i> (Producing moistness through oils) <i>Taskīn-i Dard</i> (Analgesia) <i>Sukūn-i Jismānī o Nafsānī</i> (Physical & mental rest) <i>Istifrāgh</i> (Evacuation) <i>Taskhīn</i> (To produce warmth) <i>Tajfīf</i> (To produce dryness) when caused by Rutūbat (Moistness) <i>Tafrīh-i Taba'</i> (To produce exhilaration)

Unit	Subject	Course content
9.	Management : <i>Ilaj Bil Tadbir</i>	<p><i>Takmīd</i> (Fomentation) <i>Fasd</i> (Bloodletting) <i>Hammām</i> (Therapeutic Bath) <i>Huqna Mushila</i> (Purgative enema) <i>Gharghara</i> (Gargle) <i>Qay'</i> (Emesis) <i>Natūl</i> (Irrigation) <i>Hammām Mu'tadil</i> <i>Dalk-i Atrāf</i> (Massage on the extremities)</p>
10.	Management: Pharmacotherapy and Psychotherapy	<p>Single Drugs: Halaya Siyāh (<i>Terminalia chebula</i>, Retz.), Mawīz Munaqqa, Afīmūn (<i>Cuscuta reflexa</i>, Roxb), Rewand (<i>Rheum emodi</i>, Wall. Post-i Khashkhāsh (Rind of <i>Papaver somniferum</i>, Linn.).</p> <p>Compound formulations: Zahbī Khamīra-i Zahar muhra Itrīfal-i Ustūkhudūs Ma'jūn-i Nisyān Sharbat Ahmed Shahi, Majoon Najah</p>

CARDIOVASCULAR DISORDERS

Unit	Subject	Course content
1.	Concept of Geriatric Cardiology	Why Geriatric Cardiology? How the heart grows old? Factors responsible for heart aging, geriatric age group in relation to CVD, Unani consideration of heart aging, concerns of <i>Amrad-i-Qalb</i> in elderly, incidence of various cardio-vascular disorders in the elderly specially in Indian population and regional variation
2.	Anatomical and Physiological considerations	Anatomical changes in heart and blood vessels of elderly, physiological changes in heart and blood vessels of elderly i.e Valvular Heart Disease, Arrhythmias (<i>Ikhtilāj-e-Qalb</i>) Ischemic Heart Disease, Hypertension, Du‘f al-Qalb, Suqūṭ-e-Qalb
3.	Cardio-vascular Disorders, (Etiopathological variations in elderly)	Historical background of <i>Amrad-i-Qalb</i> in Unani, risk factors for developing Arteriosclerosis <i>Tasallub-al- Sharāyīn</i> , heart disease and heart attack, Types of heart failure (etiopathogenesis) of <i>Amraz-i-Qalb</i> Etiopathogenesis of CVD, How coronary arteries get blocked? types of cardio-vascular disorders more common in the elderly
4.	Clinical presentation of CVD	What is a heart attack? Warning signs of heart attack in elderly, common clinical presentations and special presentation of <i>Amrad-i-Qalb</i> , Presenting symptoms and signs of myocardial infarction & myocardial ischemia, angina and its variants in the elderly, Isolated Systolic Hypertension in old age and presenting symptoms, Orthostatic hypotension, heart block, heart failure and features of silent heart attack in elderly, Aortic Stenosis, Atrial fibrillation, hypertension in the elderly
5.	Potential Risk Factors for CVD	Fixed and modifiable risk factors. Elderly age as risk for CVD, High risk subjects
6.	Reversal of Heart diseases	Reversal of coronary artery disease, What is reversal therapy?, Effect of reversal therapy

Unit	Subject	Course content
7.	Risk Factor Modification	Risk factor modifications better late than never, Cholesterol in the elderly, good and bad cholesterol, modifiable risk factors, Strategies for risk management
8.	Diagnostics	Laboratory investigations and their clinical variation in the elderly, Diagnostic techniques like Angiography, Holter Monitoring, Echo-cardiography, Electrocardiography, their application and clinical variations in the elderly
9.	Treatment modalities available and issues in their applicability in elderly	<ul style="list-style-type: none"> • <i>Musakkin-e-Alam</i> e.g. Itr-e-Gulab or Itr-e-Hina for local application, Afiyoon, Ajwain khurasani orally • <i>Mufattih Uruq</i> e.g. Izkhar, Kasni, Suddab • <i>Mufattih Sudad</i> e.g. Aftimoon, Sumbuluttib, Badyan • <i>Mufarrih wa Muqawwi Qalb</i> e.g. Abresham, Zafran, Mushk, Khamira, Treatment of IHD and hypertension • Re-vascularization procedures etc.
10.	Preventive Cardiology, Promotive Aspects for Healthy Heart	<p>Prevention of heart attack, Paradigm shift from curative to preventive and promotive cardiology, pharmacological and non-pharmacological preventive approaches.</p> <p>In Unani Medicine, CVD and other diseases can be easily prevented by slight modifications in <i>Asbab-e-Sitta Daruriyya</i> (Six Essential Factors) as well as in <i>Asbab-e-Ghayr Daruriyya</i></p>
11.	Life Style Modification and Dietary considerations	Life style advised in Unani, Correction of <i>Sue Mizaj</i> if present. Minimum fat should be used in diet, Do's and Don'ts, calorie and cholesterol content of various Indian food items useful in the elderly, Weight reduction if the patient is obese, management plan for Hypertension.
12.	Referral Requirements	All geriatric individuals with unstable anginas, impending CVA and progressive cardiac failures should be referred to specialized cardiac care centers/units for investigation, evaluation and management.

ENDOCRINE & METABOLIC DISORDERS

Unit	Subject	Course contents
1.	Introduction	Description of metabolic and endocrine disorders in reference to geriatrics
2.	Epidemiology of Endocrine and Metabolic disorders in the elderly	Disease wise prevalence of endocrine diseases (Diabetes mellitus, hypothyroidism, hyperlipidemia etc)
3.	Physiological, endocrine and metabolic changes in the elderly	Decrease in endocrine function in elderly, decrease in specific hormones with increased age
4.	Common endocrine and metabolic disorders in the elderly	Unani concept of various metabolic disorders in detail such as Diabetes mellitus type 2 (<i>Dhayābītus shakari</i>), Hypothyroidism, Dyslipidaemia, Hyperthyroidism, Osteoporosis, Hyperthermia, Hypoglycemia etc.
5.	Etiology and clinical presentation of common endocrine and metabolic disorders	Causes and clinical features of endocrine disorders as discussed in Unani medicine. Diagnostic procedures and differential diagnosis of individual endocrine disorders
6.	Management of metabolic and endocrine disorders	Line of treatment (<i>Uşūl-i-Ilāj</i>) according to Unani medicine, Dietotherapy (<i>Ilaj Bil Ghidha</i>), Regimenal Therapy (<i>Ilaj Bil Tadbir</i>) and Pharmacotherapy (<i>Ilaj Bil Dawa</i>) i.e. single drugs and compound formulations mentioned in Unani classical text for the treatment of respective metabolic disorders
7.	Goals of therapy of common Endocrine and Metabolic disorders in the elderly	To eliminate symptoms related to particular endocrine gland, reduce the complications of respective endocrine disorders, maintain the desirable body weight, achieve normal life style, attain utility towards family and society, educate for successful long term management.

Dhayabitus Sukkari (Diabetes Mellitus)

Unit	Subject	Course contents
1.	General introduction & Prevalence of diabetes mellitus	Diabetes mellitus in Unani and conventional medicine, prevalence of DM, national and global scenario
2.	The prevalence of diabetes mellitus in the elderly	In developed countries, in developing and newly industrialized nations.
3.	Concept of <i>Dhayabitus</i> (Diabetes) in Unani Medicine	Concept of <i>Dhayabitus</i> , <i>Dhayabitus Harr</i> , <i>Dhayabitus Barid</i> , <i>Sū'-i-Mizāj wa Du'f-i-Jigar</i>
4.	How diabetes mellitus presents in the elderly	Polyuria, polydypsia, high blood pressure dyslipidemia, cerebrovascular, and chronic pulmonary diseases
5.	Clinical presentation of diabetes in the elderly	Common symptoms like Neuropathy, nephropathy, heart and vascular problems, recurrent urinary infections or skin problems, fatigue, hypotension, incontinence, cognitive impairment or functional decline. Advanced signs like dry mouth, dry eyes, and dry skin etc.
6.	The diagnostic criteria of diabetes mellitus in elderly	In asymptomatic undiagnosed individuals. In asymptomatic individuals (as per American Diabetic Association-2000)
7.	The plan of management in the elderly diabetics	Dietary management and lifestyle modification, Line of treatment (<i>Uşūl-i-Ilāj</i>) according to Unani medicine, Dietotherapy (<i>Ilaj Bil Ghidha</i>), Regimental Therapy (<i>Ilaj Bil Tadbir</i>) and Pharmacotherapy (<i>Ilaj Bil Dawa</i>)

RESPIRATORY DISEASES

S.No.	Subject	Course Contents
1.	Introduction	Geriatrics in reference to cardio-respiratory function, demography, epidemiology, current status of care.
2.	Anatomical and Physiological Considerations	Senile structural and functional changes in the respiratory system (Cold and dry temperament, compared with previous growth stages, defined for elderly people and basal stroke output and its maximum response to exercise declines)
3.	Senile Respiratory Morbidities	Respiratory Function Tests and Vital Capacity (loss of lung compliance), in elderly, Common respiratory diseases of the elderly viz. Infections, Tuberculosis, Interstitial fibrosis, COPD, Asthma in old age, Senile bronchitis, Bronchiectasis, Malignancies (decline in maximum oxygen consumption)
4.	COPD and Asthma in elderly	Clinical presentation, diagnosis, and investigations. Treatment modalities in conventional as well as Unani medicine.
5.	Pulmonary TB in the elderly (Sil)	Clinical presentation. How it differs from adults, choice of ATT drugs for the elderly, dosage form, and side effects monitoring. Adjunct Unani therapy with regimenal therapies.
6.	Respiratory infections	Taxonomy of respiratory infections in the elderly, Clinical presentation of upper and lower respiratory tract infection, How it differs from adults, Chronic senile Bronchitis, bronchiectasis, pneumonia, Treatment of infections, How to prevent respiratory infections, Choice of conventional drug therapy and Unani treatment, Monitoring the safety of the therapies.
7.	Cancer of Respiratory tract	What are the prevalent malignancies of the Respiratory tract in old age, what the clinical presentations are, and how do clinical presentation cause, and prognosis differ in elderly patients from adults.

S.No.	Subject	Course Contents
8.	Iatrogenic diseases	Therapeutic modalities, Respiratory disorders caused by chronic consumption of drugs, inhalants, smoking, etc.
9.	Special diagnostic Procedures	Special diagnostic procedures used in respiratory diseases and their application in elderly patients, Indications, contraindications, uses, and applications.
10.	Unani Medicines	<p>Though the effects of ageing are inevitable, the rate of deterioration in organ function can be reduced by factors such as good diet and regular exercises.</p> <p>Diet/beverages of <i>Murattib</i> (Humectant) and <i>Musakhkhin</i> (Calorific) temperament.</p> <p><i>Taskhin</i> (Warming) and <i>Tartib</i> (Moistening) Drugs.</p> <p>Bronchial Asthma- <i>Madar, Anjara, Jawarish Faudnji and Falafili</i> as deobstruents.</p> <p>Chronic Infection- <i>Lahsun, Asl-us-soos, Kakkasinghi, Zanjabeel, Zufa</i></p> <p>Antitussives- <i>Katan, Parsiaushaan, Khatmi, Khubbaazi, Khuubaani, Unnaab, Arusaa</i></p> <p>Expectorants – <i>Taalisapattar, Murabba Zanjabeel, Arusaa, Tudri, Zufa.</i></p> <p>Nutrition- <i>Mā' al-shai'r, Mā' al-'Asal</i></p>
11.	Non-pharmacological care	Preventive care of adverse air-pollutants and inhalants, Correct breathing and breathing exercises, Simplified Breath control exercises (<i>Riyadat</i>).

GASTRO-INTESTINAL DISEASES

S.No.	Subject	Course Contents
1.	Introduction	<i>Sinn e Shaikhukhat, Sehat (health), Mard (disease), and Halat-e-Thalitha.</i> Importance of <i>Rutubate Ghariziyya</i> (innate moisture) via <i>Hararat Ghariziyya</i> (innate heat)
2.	Anatomical and Physiological Considerations	Senile structural and functional changes in the Gastro-Intestinal system (Cold and dry temperament defined for elderly people, compared with previous growth stages)
3.	Senile Gastro-Intestinal morbidities	Common Gastro-Intestinal diseases of the elderly viz. <i>Qabz, Tabkhir-e-Mi'da</i> , Diverticulosis and Diverticulitis, Peptic Ulcer, Irritable Bowel Syndrome (IBS) in old age
4.	GERD in elderly	Clinical presentation, diagnosis, and investigations. Treatment modalities in conventional as well as Unani systems of medicine.
5.	Irritable Bowel Syndrome (IBS) in the elderly	Clinical presentation. How it differs from adults, diagnosis and management. Dietary and lifestyle modifications along with Unani medicines.
6.	Infections and Antibiotic-Associated Diarrhea	Causes, management with diet, nutrition, and Physical Activity
7.	Patient Education and Support	To provide education on the importance of lifestyle modifications, importance of healthy diet, physical activity, regular medical check-ups, and Hygiene Practices.

MUSCULOSKELETAL & JOINT DISEASES

Unit	Subject	Course contents
1.	Introduction	Brief description of Musculoskeletal and joint diseases
2.	Issues and concerns in musculoskeletal diseases in the elderly	Diagnosis and management of joint pain in elderly is complicated by diagnostic uncertainty because of atypical manifestations and the presence of co-morbid conditions, superimposition of arthritic disorders on other medical problems prevalent in the elderly, multiple medications causing drug interaction, atypical non-classical and vague presentations of arthritic disorders
3.	Common Musculoskeletal diseases in elderly	Description of common musculoskeletal disorders in Unani medicine, common causes and pathogenesis of joint pain according to Unani concept
4.	Concept of <i>Waja'al-Mafasil</i> (Arthritis) in Unani Medicine	Detailed description of <i>Waja'al-Mafasil</i> (Arthritis) by different Unani scholars, its predisposing factors and etiopathogenesis.
5.	Classification of <i>Waja'al-Mafasil</i> (Arthritis) (Description According to Unani Medicine)	Detailed classification of <i>Waja'al-Mafasil</i> (Arthritis) as per Unani concept: Depending on the severity of clinical features and duration of disease, Depending on the humoral derangement, Depending on etiology, Depending on the type of <i>Madda</i> (Morbid material), Depending on number of morbid materials involved, Depending upon the joint involved
6.	Prevalence and <i>Asbab-e-Mu'iddah</i> (Predisposing Factors) of <i>Waja'al-Mafasil</i> (Arthritis)	Age, sex, season, hereditary, ethnicity, overexposure to sunlight and miscellaneous

Unit	Subject	Course contents
7.	Clinical presentation of <i>Waja'al-Mafāsīl</i> (Arthritis)	Clinical features of <i>Waja'al-Mafāsīl</i> (Arthritis) according to Unani concept.
8.	Management of <i>Waja'al-Mafāsīl</i> (Arthritis) in Unani Medicine	Line of Treatment: To relieve symptoms and signs, <i>Ta'dīl-e-Mizāj</i> (moderation of deranged temperament), Strengthening of <i>Quwwat Mudabbira Badān</i> (medatrix naturae) which includes <i>Tābrid</i> (cold sponging), <i>Nutul</i> (douching), <i>Bukhur</i> (fumigation), <i>Abzān</i> (Sitz bath), <i>Riyadāt</i> (Exercises). Treatment mentioned in Unani text
9.	Concept of Gout and Sciatica in Unani Medicine	Detailed description of Gout (<i>Niqris</i>) and Sciatica (<i>Irq al-Nasā</i>), its clinical features and management in Unani Medicine

URINARY DISEASES

Unit	Subject	Course contents
1.	Senile changes in Urogenital system and its impact on other organs	Senile changes in urogenital system and its impact on cardiovascular system, respiratory system, gastrointestinal system, endocrine system, Nervous system, haemopoietic system etc.
2.	Diseases of Urogenital system in elderly people	Diseases of kidney, ureters, urinary bladder, urethra, prostate, seminal vesicles, testes, penis, Uterus, ovaries, vagina etc.
3.	Clinical presentation of urogenital diseases and complications in elderly people	Clinical presentation of diseases like urinary tract infection, renal failure, obstructive uropathies, bladder atony, cystitis, benign prostatic hyperplasia, neoplasia, balanitis, leukoplakia etc. <i>Ihtibās- al-Bawl, Taqtīr- al-Bawl, Du'f al-Kulya, Hasāh al-Mathāna, Quruh al-Kulya, Injimad al-Dam fi'l Mathana</i> etc.
4.	Diagnostic techniques and measures in geriatric health care	Application of various diagnostic techniques like cystoscopy, uroflowmetry, ultrasonography, transrectal ultrasonography (TRUS), CT Scan, MRI etc in diagnosis of various urinary disorders in elderly patients.
5.	Available therapeutic modalities and supplementation by Unani therapeutic measures.	Therapeutic modalities for treatment of urinary disorders and use of Unani therapies in their management.
6.	Therapeutic measures	Medicines and surgical procedures along with <i>Ilaj Bil Tadbir</i> therapies for management.
7.	Preventive measures	Preventive measures achieved by lifestyle modifications, <i>Ilaj Bil Tadbir</i> therapies, <i>Ghidha</i> , personal hygiene, etc.
8.	Precautions, complications and limitation of treatment procedures	Precautions, <i>Muqawwiyyat and Mughazziyat</i> , complications and limitation of treatment procedures in geriatric care.
9.	<i>Tadābīr-i-Mashā'ikh</i> (Geriatric Care)	<i>Ilaj-bil-Ghidha</i> (Diet Therapy), <i>Ilaj-bil-Tadbir</i> (Regimenal Therapy), <i>Ilaj-bil-Dawa</i> (Drug Therapy) etc.

ANO-RECTAL DISORDERS

Unit	Subject	Course contents
1.	Definition of Ano-Rectal Disorders	Definition of Anorectal diseases & Common ailments of anorectal area in Elderly.
2.	Predisposing factors of anorectal diseases in elderly	Gastrointestinal upset, nutritional factors, degenerative changes and impaired immunity are the common predisposing factors.
3.	Senile changes in anorectal area	Senile changes in perinium, Ano rectal region.
4.	Clinical presentation of ano-rectal diseases in Elderly	Clinical presentation of diseases like perianal pain, per rectal bleeding. Perianal pus discharge, feeling of mass in and outside of anal canal, constipation etc.
5.	Diagnostic tools	Application of various diagnostic technique like proctoscopy, anal manometry, sigmoidoscopy, CT scan, MRI, Ultrasonography etc.
6.	<i>Uşul-i-‘Ilāj</i> (Principles of Treatment)	Treatment of cause, treatment by life style modification.
7.	Therapeutic measures	<i>‘Ilaj bi’l Tadbir</i> (Regimental Therapy), <i>‘Ilaj bi’l Ghidha’</i> (Dieto-therapy), <i>‘Ilaj bi’l Dawa’</i> (Pharmacotherapy) & <i>Ilaj bi’l Yad</i> (Surgery).
8.	Preventive measures	Preventive measures achieved by some life style modification even after surgical treatment
9.	Precaution, Complication and limitation of the treatment	Precaution, Complication and limitation of the treatment in geriatric care.

WOUND MANAGEMENT

Unit	Subject	Course content
1.	Aetio-pathogenesis of wound in elderly people, incidence and factors responsible for wound healing	Aetio-pathogenesis of wound in elderly incidence, effect of aging on wound healing, common factors and diseases of elderly age related with wound healing and senile nutritional status affecting the wound healing.
2.	Common wounds in elderly people	Common wounds of elderly people like diabetic wound, vascular ulcers, tropic ulcers, gangrene, filarial ulcers, neoplastic ulcers, Burgers disease, Bony ulcers, burns.
3.	Clinical presentation and complications of wounds in elderly people	Clinical presentation of wounds like pressure ulcers, chronic non healing ulcers, diabetic foot ulcer, vascular ulcers and infected wounds.
4.	Diagnostic measures	Application of various diagnostic technique like haematological, biochemical, bacteriological, histopathological, peripheral Doppler, X-ray etc in diagnosis of various wounds in elderly patients.
5.	Available therapeutic modalities, principles and scope of wound management by Unani therapeutic measures	Therapeutic modalities for treatment of wounds and use of Unani therapies like <i>Ta'liq al-'Alaq</i> (leeching), <i>Fasd</i> (venesection), <i>Hijāmā</i> (cupping), <i>Mudammil Quruh Adwiya</i> , <i>Daf'-i-Ta'affun Adwiya</i> .
6.	Therapeutic measures	Medicines and surgical procedures along with Unani formulation (Kundur, Mur, Elwa, and Dam-ul-Akhwain)
7.	Preventive measures	Preventive measures achieved by Unani, purificatory procedures like <i>Fasd</i> (venesection), <i>Ta'liq al-'Alaq</i> (leeching)
8.	Precautions, Complications and limitations of therapies	Precautions, complications and limitations of treatment procedures in geriatric health care.
9.	Practical Demonstrations	Demonstrations of wound care techniques and demonstrations of therapies to be given.

ADJUVANT THERAPY FOR CANCER

Unit	Subject	Course content
1.	Senile body changes and concept of Neoplasia in elderly	Senile body changes associated with neoplasia and concept of <i>Sartan</i> in Unani Medicine
2.	Diagnostic problems and measures to be adopted for diagnosis of Cancer in elderly	Modes of diagnosis for various organ systems and problems of diagnosis in elderly people with special reference to screening
3.	Available treatment modalities and supplementation by Unani therapeutic measures.	Management of <i>Sartan</i> by regaining the humoral balances, to restore the healthy lifestyle by observing <i>Asbab Sitta Daruriyya</i>
4.	Adjuvant Unani medicines for conventional chemotherapeutic agents	<i>Ilaj bil Tadbir</i> like <i>Hamman</i> , <i>Dalak</i> , <i>Shamum</i> , <i>Riyadat</i> , <i>Hijama</i> , <i>Fasd</i> for improving the quality of life
5.	Use of Unani procedures and drugs for minimizing the adverse effects of chemotherapy and Radiotherapy	<i>Mundij-i-Sawdā Adwiya</i> , <i>Mushilat-e-Sawda Adwiya</i> , to reduce anaemia, delirium, diarrhoea, oedema, fatigue, hair loss etc.

Diseases of Sense organ (Eyes, Ears, Nose, Tongue and Skin)

Unit	Subject	Course content
1.	Issues and concern in diseases of <i>Hawas Khamsa Zahira</i> in Elderly	Concept of sense perception in Unani.
2.	Anatomical and Physiological Changes various sense organ in Elderly	Description of senile changes in Eyes, Ears, Nose, Tongue and Skin
3.	Common sense organ diseases in Elderly	Hearing impairment, visual impairment, cataract, glaucoma, vestibular disorders, Meniere's disease, Tinnitus, Deafness, psoriasis, urticaria, eczemas etc.
4.	Causes of various sense organ disorders and their clinical presentation	Causes of sense organ disease and their pathogenesis as per Unani concept and current trends, clinical presentation of each disease.
5.	Complications, Chronicity, Prognosis	Complication of each disease as per modern medicine.
6.	Clinical Diagnosis and Diagnostic Problems in Elderly	Modes of diagnosis for various sense organ diseases, key history, physical examination of each sense organ, problems of diagnosis in Elderly.
7.	Errors in Diagnosis	Failure to recognise the sign and symptoms of hearing loss by primary care practitioners, attribution of visual impairment to normal ageing, negligence by the clinician in asking about visual impairment in elderly.
8.	Approach to treatment, non-pharmacological and pharmacological	Available treatment modalities in modern medicine including surgical approach, their limitation, & non pharmacological approaches.
9.	Treatment of Cataract Unani approach	Management of <i>Nuzūl al-Mā'</i> , according to the book <i>Al-Qānūn fi'l Ṭibb</i> .
10.	Geriatric Problems of Sense Organs (Eye, Ear, Nose & Tongue) Which Need Referral for Better Care & Management	Referral requirement & timely judgment in case of sense organ disorders.

GERIATRIC WOMEN HEALTH CARE

Unit	Subject	Course contents
1.	Anatomico-physiological changes in elderly women	Senile changes in the elderly women with special reference to reproductive system, hormonal changes related with pre-menopausal and menopausal period. Patho-physiology of menopause, reference of menopause in classical Unani texts
2.	Specific diseases in elderly women	Specific diseases of elderly women like post menopausal syndrome, osteoporosis, senile vaginitis, hypertension, diabetes mellitus, senile pyometra, vaginal bleeding etc. and psychological problems of elderly women.
3.	Understanding of etio-pathogenesis and presentation of diseases in elderly women	Specific etiology, pathogenesis and different modes of clinical presentation, differential diagnosis of Post- menopausal syndrome, osteoporosis, senile vaginitis, vaginal bleeding, menorrhagia, metrorrhagia etc, psychological problems, diabetes mellitus and hypertension in elderly women.
4.	Diagnostic methodology measures and techniques for diseases of elderly women	Specific diagnostic measures, tools and techniques to be adopted for diagnosis of specific disease conditions, and for their differential diagnosis, their description and methodology in elderly women
5.	Available treatment modalities for the treatment of diseases of elderly women	Presently available treatment modalities and practice of medical and surgical procedures for the treatment of elderly women including HRT, their indications, side effects along with limitations of their use
6.	Unani Treatment modalities in the care of Disease of Elderly women	<i>Ilāj Bil Tadbir</i> (Regimenal Therapy), <i>Ilāj Bil Ghidha</i> (Dietotherapy), <i>Ilāj Bil Dawa</i> (Pharmacotherapy), <i>Ilāj Bil Yad</i> (Surgical Treatment), <i>Ilāj Nafsānī</i> (Psychotherapy) in care of elderly women and their diseases, Massage (<i>Dalk</i>), Leech Therapy (<i>Ta'liq al-'Alaq</i>), cupping therapy (<i>Hijāmā</i>). Phytoestrogens and micronutrients and Unani herbal medicines and their role, immuno modulation.



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